| WEIST BOWDEN, ABBIE J 9230 CRYSTAL VIEW COURT FORT MYERS, FL 33967 US | | | | | | | |
|---|--|----------------------------|---|-------------|--|--|--|
| The above na | med entity submits this statement for the purpose of changin | g its registered office or | registered agent, or both, in the State | of Florida. | | | |
| SIGNATU | IRE: ABBIE J WEIST BOWDEN | | | 01/09/2015 | | | |
| | Electronic Signature of Registered Agent | | | Date | | | |
| Officer/Di | irector Detail : | | | | | | |
| Title | PS | Title | VP | | | | |
| | | | | | | | |

| | <u>2015</u> | FLORIDA | PROFIT | CORPORA | TION A | | <u>REPORT</u> |
|--|-------------|----------------|--------|---------|--------|--|---------------|
|--|-------------|----------------|--------|---------|--------|--|---------------|

DOCUMENT# P03000084837

Entity Name: ABBIE J. WEIST, INC.

Current Principal Place of Business:

9230 CRYSTAL VIEW COURT FORT MYERS, FL 33967

Current Mailing Address:

9230 CRYSTAL VIEW COURT FORT MYERS. FL 33967 US

FEI Number: 54-1535797

Name and Address of Current Registered Agent:

WEIST 9230 C FORT

| Officer/Director Detail : | | | | | | | |
|---------------------------|-------------------------|-----------------|-------------------------|--|--|--|--|
| Title | PS | Title | VP | | | | |
| Name | WEIST BOWDEN, ABBIE J | Name | BOWDEN, MORGAN | | | | |
| Address | 9230 CRYSTAL VIEW COURT | Address | 9230 CRYSTAL VIEW COURT | | | | |
| City-State-Zip: | FORT MYERS FL 33967 | City-State-Zip: | FORT MYERS FL 33967 | | | | |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ABBIE J,. WEIST BOWDEN

PRESIDENT

01/09/2015 Date

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No